

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212543048				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: FRANKLIN SERVICE CORPORATION</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: DONALD F MARKER 4501 COX ROAD GLEN ALLEN, VA 23060</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 12/31/2012</p> <p>SCC ID NO: 01294941</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>5,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED					
COMMON	5,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: PO BOX 5310</p> <p style="margin-left: 40px;">CITY/ST/ZIP: GLEN ALLEN, VA 23058</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: RICHARD T WHEELER JR TITLE: PRESIDENT ADDRESS: 4501 COX RD CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: RICHARD T WHEELER JR TITLE: PRESIDENT ADDRESS: 4501 COX RD CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: RICHARD T WHEELER JR TITLE: PRESIDENT ADDRESS: 4501 COX RD CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: STEVEN R. LOHR TITLE: VICE PRESIDENT ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: STEVEN R. LOHR TITLE: VICE PRESIDENT ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR	
NAME: STEVEN R. LOHR TITLE: VICE PRESIDENT ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: DONALD F MARKER TITLE: SECRETARY/TREAS ADDRESS: 4501 COX RD CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: DONALD F MARKER TITLE: SECRETARY/TREAS ADDRESS: 4501 COX RD CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR	
NAME: DONALD F MARKER TITLE: SECRETARY/TREAS ADDRESS: 4501 COX RD CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: BARRY R. SHENTON TITLE: VICE PRESIDENT ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: BARRY R. SHENTON TITLE: VICE PRESIDENT ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR	
NAME: BARRY R. SHENTON TITLE: VICE PRESIDENT ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: ALICE W. STEWART TITLE: ASST SECRETARY ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: ALICE W. STEWART TITLE: ASST SECRETARY ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR	
NAME: ALICE W. STEWART TITLE: ASST SECRETARY ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: HUGH T. HARRISON II TITLE: DIRECTOR ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: HUGH T. HARRISON II TITLE: DIRECTOR ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: HUGH T. HARRISON II TITLE: DIRECTOR ADDRESS: 4501 COX RD. CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR				

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	L GERALD ROACH DIRECTOR 4501 COX RD GLEN ALLEN, VA 23060	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ELIZABETH W. ROBERTSON DIRECTOR 4501 COX RD. GLEN ALLEN, VA 23060	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE L SCOTT DIRECTOR 4501 COX RD GLEN ALLEN, VA 23060	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD W. WILTSHIRE, JR. DIRECTOR 4501 COX RD. GLEN ALLEN, VA 23060	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PERCY WOOTTON DIRECTOR 4501 COX RD GLEN ALLEN, VA 23060	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAURA C CROWDER VICE PRESIDENT 4501 COX ROAD GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FREDERICK L DIXON VICE PRESIDENT 4501 COX ROAD GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LYNNE B TICKLE VICE PRESIDENT 4501 COX ROAD GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WARREN A MACKEY DIRECTOR 4501 COX ROAD GLEN ALLEN, VA 23060	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ RICHARD T WHEELER JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	RICHARD T WHEELER JR, PRESIDENT PRINTED NAME AND CORPORATE TITLE	11/7/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			